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ANNUAL REPORT Foreign LLP

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1. L.L.P. ID and Name:

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			FAX # FILING DATE: Due during the anniversary month of Registration and delinquent after the last day of the following month.	
2. The jurisdiction under wl	hose law it is formed			
3. The address of the princ	ipal or chief executive office.			
Street Address		City	State	ZIP+4
Mailing Address (Optional)		City	State	ZIP+4
4. The name of the South I	Dakota Registered Agent			
Street Address (Required to b	e a South Dakota Address)	City	State	ZIP+4
Mailing Address (Optional – R	Required to be a South Dakota Address)	City	State	ZIP+4
5. The names and busines	s addresses of its partners.			
Partner	Street Address	City		State ZIP+4
Partner	Street Address	City		State ZIP+4
Partner	Street Address	City		State ZIP+4
Partner	Street Address	City		State ZIP+4
Dated		(Signature of Partner)		
		(Printed Name)		
		- (Title)		